DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 /	673761	RECEIPT DATE:	10 /	18 /	0.0
IA NUMBER: PCT/ IL99 /	' 00214	IA FILING DATE:	04 /	22 /	99
FAMILY NAME: TE-ENI	•	DELAY WAIVED (Y/	W :		Υ
GIVEN NAME: BEN		DEMAND RECEIVED	(Y/N):		γ
PRIORITY CLAIMED (Y/N):	Υ	PRIORITY DATE:	04 /	22 /	98
NO BASIC FEE (Y/N):	N	US DESIGNATED ON	LY (YZ	N.) #	N
ATTORNEY DOCKET NUMBER:	144/01890	COUNTRY:			
CORRESPONDENCE NAME/ADDA	RESS: CUSTOMER	NUMBER: 000000 TELEFT	HONE	0000000	000
		FAX			

NAME:

WILLIAM H DIPPERT

COWAN LIEBOWITZ AND LATMAN

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CITYS

NE₩ YORK

STATE/COUNTRY: NY ZIP: 100369200

EMAIL:

APPLICATION TITLES:

METHOD AND SYSTEM FOR PROVIDING CELLULAR COMMUNICATIONS SERVICES

TAB TO LAST POSITION, PUSH SEND



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Rib Data Sheet

SERIAL NUMBER 09/673,761 FILING DATE 10/18/2000 CLASS 455 APPLICANTS Ben Te-Eni, Tel-Aviv, ISRAEL; Gil Israeli, Karme-Yosef, ISRAEL; THIS APPLICATION IS A 371 OF PCT/IL99/00214 04/22/1999							
WHICH CLAIMS BENEFIT OF 60/082,618 04/22/1998 ** FOREIGN APPLICATIONS ************************************							
Foreign Priority claimed 35 USC 119 (a-d) conditionet Verified and Acknowledged	ions	state or country israel	SHEETS DRAWING 6	TOTAL CLAIMS	INDEPENDENT CLAIMS 3		
ADDRESS — William H Dippert Cowan Liebowitz & Latman 1133 Avenue of the Americas New York ,NY 10036-6799							
TITLE Method and system for providing cellular communications services							
FILING FEE RECEIVED No to charge/credit DEPOSIT ACCOUNT No for following:			OUNT 1.1	☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other ☐ Credit			



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CONFIRMATION NO. 4234

SERIAL NUMBER 09/673,761	FILING DATE 10/18/2000 RULE	CLAS 455	•	GROUP ART UNIT 2684		ATTORNEY DOCKET NO. 144/01890		
APPLICANTS			•					. ,
Ben Te-Eni, T Gil Israeli, Ka	Fel-Aviv, ISRAEL; rme-Yosef, ISRAEL;					-		
** CONTINUING DATA **********************************								
** FOREIGN APPL	CATIONS *************	***						
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 11/17/2000								
Foreign Priority claimed	☑ yes ☐ no	ST	ATE OR	епе	SHEETS TO		\ I	INDEPENDENT
35 USC 119 (a-d) condition	5 USC 119 (a-d) conditions yes no Met after				DRAWING		VIS	CLAIMS
Verified and	Allowance			20 3				
	Examiner's Signature Init	tials						
ADDRESS William H Dippert Cowan Liebowitz & Latman 1133 Avenue of the Americas New York ,NY 10036-6799								
TITLE								
Method and system for providing cellular communications services								
					☐ All Fees			
					☐ 1.16 Fees (Filing)			
RECEIVED No.	S: Authority has been given in Pato charge/credit DEP				1.17 Fees (Processing Ext. of time)			
754 No	for following:	*			☐ 1.18 Fees (Issue)			
					Other			
					☐ Credit			